·									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								·	Ş	362.	Có	1154	
		CLAIMS AS	S FILED - (Column		-	Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			17					RATI	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE		355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		•			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			<i></i>		•			X40=			OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=			OR	+270=	
·If	the difference	in column 1 is	less than zero, enter "0"			column 2	TOTAL			OR	TOTAL	'M	
CLAIMS AS AMENDED - PART II												OTHER	THAN
		(Column 1)		(Colu		(Column 3)		SMAL	LL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
	Total	· ](	Minus	J	٥	-		X\$ 9:	=		OR	X\$18=	
	Independent	· 3	Minus	··· 3	ı	• —	X40				OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		l	+135:			OR	+270=	
								101					
								ADDIT. F			OR	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colui		(Column 3)	١,		_				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
	Total	•	Minus	••		9		X\$ 9=	-		OR	X\$18=	
	Independent	•	Minus	***		2		X40=	1		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 105	┪			.070	
							Į	+135=			OR	+270= TOTAL	
									Ē		OR	ADDIT. FEE	
		(Column 1) CLAIMS	(Column 3)					_					
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
	Total	•	Minus	•		e e	lſ	X\$ 9=			OR	X\$18=	
	Independent	•	Minus	•••		9		X40=	7		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	┪		<u>-</u> ا		-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									ı AL		OR	+270=	
"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT. FEE	
			- C C							anniera hau			

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